

## MATERNAL MORTALITY FROM ALL CONDITIONS CONNECTED WITH CHILDBIRTH.

### SUMMARY.

In 1913 in this country at least 15,000 women, it is estimated, died from conditions caused by childbirth; about 7,000 of these died from childbed fever, a disease proved to be almost entirely preventable, and the remaining 8,000 from diseases now known to be to a great extent preventable or curable. Physicians and statisticians agree that these figures are a great underestimate.

In 1913 the death rate per 100,000 population from all conditions caused by childbirth was little lower than that from typhoid fever; this rate would be almost quadrupled if only the group of the population which can be affected, women of childbearing age, were considered.

In 1913 childbirth caused more deaths among women 15 to 44 years old than any disease except tuberculosis.

The death rate due to this cause is almost twice as high in the colored as in the white population.

Only 2 of a group of 15 important foreign countries show higher rates from this cause than the rate in the registration area of the United States. The rates of 3 countries, Sweden, Norway, and Italy, which are notably low, show that low rates for these diseases are attainable.

The death rates from childbirth and from childbed fever for the registration area of this country apparently are not falling to any great extent; during the 13 years from 1900 to 1913 they have shown no demonstrable decrease. These years have been marked by a revolution in the control of certain other preventable diseases, such as typhoid, diphtheria, and tuberculosis. During that time the typhoid rate has been cut in half, the rate from tuberculosis markedly reduced, and the rate from diphtheria reduced to less than one-half. During this period there has been a decrease in the death rate from childbirth per 1,000 live births in England and Wales, Ireland, Japan, New Zealand, and Switzerland.

These facts point to the need in this country and in foreign countries of higher standards of care for women at the time of childbirth.

The low standards at present existing in this country result chiefly from two causes: (1) General ignorance of the dangers connected

with childbirth and of the need for proper hygiene and skilled care in order to prevent them; (2) difficulty in the provision of adequate care due to special problems characteristic of this country. Such problems vary greatly in the city and in the rural districts. In the country inaccessibility of any skilled care is a chief factor.

Improvement will come about only through a general realization of the necessity for better care at childbirth. If women demand better care, physicians will provide it, medical colleges will furnish better training in obstetrics, and communities will realize the vital importance of community measures to insure good care for all classes of women.